
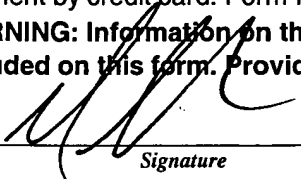


TFW 3623 #

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. <b>522485-0321453 (EMD0001)</b>									
Applicant(s): <b>MARY L. RICHARDSON</b>													
Application No. <b>09/733,921</b>	Filing Date <b>12/12/2000</b>	Examiner <b>COLON, CATHERINE M.</b>	Customer No. <b>00909</b>	Group Art Unit <b>3623</b>	Confirmation No. <b>3793</b>								
Invention: <b>METHOD AND SYSTEM FOR EMPLOYMENT PLACEMENT</b>													
 <b>COMMISSIONER FOR PATENTS:</b>													
Transmitted herewith is an amendment in the above-identified application.													
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27													
The fee has been calculated and is transmitted as shown below.													
<b>CLAIMS AS AMENDED</b>													
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE								
TOTAL CLAIMS	37 -	67 =	0	x \$25.00	\$0.00								
INDEP. CLAIMS	2 -	5 =	0	x \$100.00	\$0.00								
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00								
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$0.00</b>								
<input checked="" type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input type="checkbox"/> A check in the amount of _____ to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. <b>03-3975</b> <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17. <input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached. <b>WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.</b>													
 _____ <i>Signature</i>			Dated: <b>MAY 16, 2006</b>										
<b>MICHAEL BEDNAREK</b> <b>REG. NO. 32,329</b> <b>PILLSBURY WINTHROP SHAW PITTMAN LLP</b> <b>1650 TYSONS BOULEVARD</b> <b>MCLEAN, VA 22102</b>			<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td colspan="2">I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on</td> </tr> <tr> <td style="width: 50%; text-align: center;">_____ (Date)</td> <td style="width: 50%;"></td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Signature of Person Mailing Correspondence</td> </tr> <tr> <td colspan="2" style="text-align: center;">_____ Typed or Printed Name of Person Mailing Correspondence</td> </tr> </table>			I certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to "Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450" [37 CFR 1.8(a)] on		_____ (Date)		_____ Signature of Person Mailing Correspondence		_____ Typed or Printed Name of Person Mailing Correspondence	
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CC:													

EMD0001-US



PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re the Application of:  MARY L. RICHARDSON  Serial No.: 09/733,921  Filed: December 12, 2000  For: METHOD AND SYSTEM FOR EMPLOYMENT PLACEMENT	    Art Unit: 3623  Examiner: CATHERINE M. COLON
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**AMENDMENT**

Box: Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

In response to the Office Action mailed on November 16, 2005, please amend the above-identified application as set forth below.

A three-month extension of time is believed to be due, as detailed in the attached documents. However, any extension of time necessary to prevent abandonment is hereby requested, and any fee necessary for consideration of this response is hereby authorized to be charged to Deposit Account Number 03-3975.

**Amendments to the Claims:** reflected in the list that begins on page 2 of this paper.

**Remarks:** begin on page 9 of this paper.